

CLAIMS ONLY

Application Number

10628839

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1										51			
2				/					/	52			
3				/					/	53			
4			/			/				54			
5										55			
6										56			
7										57			
8										58			
9										59			
10			/			/				60			
11				/					/	61			
12				/					/	62			
13				/					/	63			
14				/					/	64			
15				/					/	65			
16				/					/	66			
17				/					/	67			
18				/					/	68			
19				/					/	69			
20				/					/	70			
21				/					/	71			
22				/					/	72			
23				/					/	73			
24										74			
25										75			
26										76			
27			/			/				77			
28				/						78			
29				/						79			
30				/						80			
31				/						81			
32				/						82			
33				/						83			
34				/						84			
35				/						85			
36				/						86			
37				/						87			
38				/						88			
39				/						89			
40				/						90			
41										91			
42										92			
43										93			
44										94			
45										95			
46										96			
47										97			
48										98			
49										99			
50										100			
Total Indep			5			5				Total Indep			
Total Depend			26			26				Total Depend			
Total Claims			31			31				Total Claims			